

## LETTER OF TRANSMITTAL

To:	US-EN AGEN	ivironmental Cy	PROTECTION		Date:	1/14/2016	
_	290 B REGIC	ROADWAY, 21 <sup>st</sup> DN 2	FLOOR		Re:	NEWARK LIBERTY IN AIRPORT – TERMINAI	
						1100000	
	NEW	YORK, NY 10007	f				
<del>-</del>	ATTN:	ROSALIE SBERN	'A		JOB#	4583/16	
For Y	For Your:			The	Following:		
	Appro Use/It Record Signat Other	nformation d ture			Certificates Samples Pre-Project Close-Out Other		
COI	PIES	DATE	NO.			DESCRIPTION	
2	2 1/14/2016 ASBEST		SBESTOS ABATEM	TOS ABATEMENT PROJECT NOTIFICATION			
Actic	on:						
200	No Ac	Return To Our C tion Required ned For Correction marks					
<i>Reme</i> Enc		s the above refere	nced notificatio	Should you have a	ny questions, į	please feel free to contact	
our	office.	CAN YOU PL	EASE SIGN A		IEVED COP	Y WITH THE ATTACHEI	O SELF
Соріє	es To:	File		Prepared	By: <i>Renata D</i> .	Buczek	
						ered Over Night FedEx	☑Reg. Mail

## U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION 1 of 2

Operator Project:	Postmark:	Date Received:	Notification: 1 (COURTE	SY FILING)
I. TYPE OF NOTIFICATION	(O=Original, R=Revised):	0		
II. FACILITY INFORMATION	N (Identify owner, removal contra	actor, and other operator)		
OWNER NAME: PORT AUTH	ORITY OF NEW YORK & NE	EW JERSEY		
ADDRESS: 241 ERIE STREET	·			
CITY: JERSEY CITY	STATE: NJ	1	ZIP CODE: 07310	
CONTACT: MR. RALPH CAM	PIONE	=	PHONE: (201)-595-3400	
REMOVAL CONTRACTOR: ET	S CONTRACTING, INC.			
ADDRESS: 160 CLAY ST	TREET			
CITY: BROOKLYN	STATE: N	Y	ZIP CODE: 11222	
CONTACT: RICHIE SMITH			PHONE: (718) 706-6300	
OTHER OPERATOR:	NOT APPLICABLE			
ADDRESS:				
CITY:	STATE:		ZIP CODE:	
CONTACT:			PHONE:	
III. TYPE OF OPERATION (D	=Demo, O=Ordered, R=Renovati	ion) R		
IV. IS ASBESTOS PRESENT?	(yes/no) YES			
V. FACILITY DESCRIPTION	(include building name, number	, floor and/or room number):		
BLDG. NAME: TERMINAL A	CONTROL TO THE PARTY OF THE PAR			
ADDRESS: NEWARK LIBERT	TY INTERNATIONAL AIRPO	PRT – 3 BREWSTER ROAD		
CITY: NEWARK	STATE:	: NJ	COUNTY: ESSEX	
SITE LOCATION: ARRIVALS I	LEVEL			
BUILDING SIZE SQ METER	RS: SQ FT: 100	,000 #OF FLOC	ORS: 3 AGE IN YEARS: 70+	
PRESENT USE: TERMINAL		PRIOR US	E: TERMINAL	
VI. PROCEDURE, INCLUDIN	G ANALYTICAL METHOD,	IF APPROPRIATE, USED T	O DETECT TO PRESENCE OF ASBE	STOS MATERIAL:
SAMPLING AND ANALYS	IS ACCORDING TO EPA AP	PROVED METHODS.		
		ON-FRIABLE ASBESTOS M	ATERIAL THAT WILL NOT BE REM	MOVED. SPECIFY THE
AMOUNT OF ASBESTOS	BELOW:	DIGME D. D.		laterials To Be Removed:
		RACM To Be Ren	noved Category I	Category II
PIPES – LINEAR FEET			*	
PIPES – LINEAR METERS				
SURFACE AREA – SQUARE FE	ET	75 SF		
SURFACE AREA – SQUARE MI	ETERS			
VOLUME RACM OFF FACILITY	Y COMPONENT - CUBIC FEET			
VOLUME RACM OFF FACILITY	Y COMPONENT – CUBIC MET	ERS		
VIII. SCHEDULED DATES AS	BESTOS REMOVAL (MM//I	DD/YY) START: 1/28/2016	COMPLETION:	3/31/2016
IX. SCHEDULED DATES DEM	MO/RENOVATION (MM/D	DD/YY) START: TBD	COMPLETION:	TBD

## U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION (continued) 2 of 2

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:

REMOVAL AND DISPOSAL OF ASBESTOS-CONTAINING MATERIALS (ACM) ACCORDING TO THE APPLICABLE RULES AND REGULATIONS.

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

ACM HAS BEEN IDENTIFIED AND WILL BE HANDLED ACCORDING TO THE APPLICABLE REGULATIONS.

NAME: TRI-STATE TRANSFER ASSOC. INC  ADDRESS: 1199 RANDAL AVENUE  CITY: BRONX STATE: NY ZIP CODE: 10474  CITY: STATE: ZIP CODE:  CONTACT: JIM BRYNE PHONE: (718) 617-0771  CONTACT: PHONE:  WASTE TRANSPORTER #3  NAME:  ADDRESS:  CITY: STATE: ZIP CODE:  CONTACT: PHONE:  XIII. WASTE DISPOSAL SITE  NAME: MINERVA ENTERPRISES INC.
CITY: BRONX STATE: NY ZIP CODE: 10474 CITY: STATE: ZIP CODE:  CONTACT: JIM BRYNE PHONE: (718) 617-0771 CONTACT: PHONE:  WASTE TRANSPORTER #3  NAME:  ADDRESS:  CITY: STATE: ZIP CODE:  CONTACT: PHONE:  XIII. WASTE DISPOSAL SITE
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CONTACT: PHONE:  XIII. WASTE DISPOSAL SITE
XIII. WASTE DISPOSAL SITE
NAME: MINERVA ENTERPRISES INC.
LOCATION: 9000 MINERVA ROAD
CITY: WAYNESBURG, OHIO
PHONE: 330-866-3435
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:
NAME: NOT APPLICABLE TITLE:
AUTHORITY:
DATE OF ORDER (MM/DD/YY):  DATE ORDERED TO BEGIN (MM/DD/YY):
XV. FOR EMERGENCY RENOVATIONS NOT APPLICABLE
DATE AND HOUR OF EMERGENCY (MM/DD/YY):
DESCRIPTION OF SUDDEN OR UNEXPECTED EVENT:
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WOULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE FINANCIAL BURDEN:
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMPLED, PULVERIZED OR REDUCED TO POWDER:
ACM HAS BEEN IDENTIFIED AND WILL BE DEALT WITH ACCORDING TO ALL APPLICABLE REGULATIONS.
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR. PART 61, SUBPART M) WILL BE ON- SITE DURING THE DEMOLITION OR RENOVATION AND EXIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (Required 1 year after promulgation).
RICHIE SMITH, ETS CONTRACTING INC.  As Representative For The Owner  Signature of Owner/Operator  Date
XVII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.
RICHIE SMITH, ETS CONTRACTING, INC As Representative For The Owner  Signature Of Owner/Operator  Date